

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 2
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Right to Rise USA	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00571372 </div>
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Redwave Communications		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 08 / 20 / 2015</div> </div>	
Mailing Address 4019 Ingersoll Ave.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">23625.14</div>	
City Des Moines	State IA	Zip Code 50312	Transaction ID : 001 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 08 / 18 / 2015</div> </div>
Purpose of Expenditure Postage		Category/ Type 004	
Name of Federal Candidate Jeb Bush		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">123608.48</div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Spectrum Marketing Companies		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 08 / 20 / 2015</div> </div>	
Mailing Address 95 Eddy Rd. Suite 101		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">40750.15</div>	
City Manchester	State NH	Zip Code 03103	Transaction ID : 002 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 08 / 19 / 2015</div> </div>
Purpose of Expenditure Postage		Category/ Type 004	
Name of Federal Candidate Jeb Bush		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NH
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">189733.49</div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">64375.29</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Charles R. Spies

[Electronically Filed]

Date

MM / DD / YYYY
08 / 21 / 2015

Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 2 OF 2
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Right to Rise USA		FEC IDENTIFICATION NUMBER ▼ C C00571372	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Redwave Communications		Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 20 / 2015	
Mailing Address 4019 Ingersoll Ave.		Amount 23066.19	
City Des Moines	State IA	Zip Code 50312	Transaction ID : 003
Purpose of Expenditure Printing	Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 08 / 19 / 2015	
Name of Federal Candidate Jeb Bush		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> General District: _____ State: IA	
Calendar Year-To-Date Per Election for Office Sought 146674.67		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee Redwave Communications		Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 20 / 2015	
Mailing Address 4019 Ingersoll Ave.		Amount 34267.96	
City Des Moines	State IA	Zip Code 50312	Transaction ID : 004
Purpose of Expenditure Printing	Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 08 / 19 / 2015	
Name of Federal Candidate Jeb Bush		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> General District: _____ State: NH	
Calendar Year-To-Date Per Election for Office Sought 224001.45		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	57334.15
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	121709.44

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Charles R. Spies

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Date

MM / DD / YYYY
08 / 21 / 2015

Signature